



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 1823

SERIAL NUMBER 10/781,179	FILING DATE 02/18/2004  RULE	CLASS 514	GROUP ART UNIT 1618	ATTORNEY DOCKET NO. 283702-14-1
-----------------------------	---------------------------------------	--------------	------------------------	---------------------------------------

## APPLICANTS

Anthony William Sly, Westminster Perth, WA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/049,784 02/15/2002 ABN  
 which is a 371 of PCT/AU00/00977 08/16/2000

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

AUSTRALIA PQ2281 08/18/1999

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/14/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <u>Z. L.</u> Initials	WA	0	15	3

## ADDRESS

08933  
 DUANE MORRIS, LLP  
 IP DEPARTMENT  
 30 SOUTH 17TH STREET  
 PHILADELPHIA , PA  
 19103-4196

## TITLE

Ophthalmic fluid

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
RECEIVED		